

# REQUEST FOR PERMISSION TO ARRANGE

## INSTRUCTIONS

This form is to be prepared in duplicate. Sign both copies where indicated, forward the form to the publisher who will complete the form and return it to you. If the publisher indicates a payment for the right you request, and if the conditions are agreeable to you, remit the amount to the publisher together with the original copy, which they have signed, whereupon the agreement will be completed.

To: \_\_\_\_\_ Date: \_\_\_\_\_  
(Name of Publisher)

\_\_\_\_\_  
(Address of Publisher)

To Whom It May Concern:

We hereby request your permission and non-exclusive license to arrange the following musical composition.

\_\_\_\_\_  
By: \_\_\_\_\_

(Hereinafter referred to as "The Arrangement")

1. The Arrangement will be for marching band performances. We will produce only enough copies of The Arrangement as are needed for use and performance.
2. We understand that except as granted above, you reserve all rights in the musical composition including those related to printing, publishing, vending, recording, or publicly performing for profit. We agree not to distribute (except for use of copies as provided in Paragraph 1), sell, loan or lease copies of The Arrangement to anyone.
3. All copies of The Arrangement shall bear the following copyright and words "Arranged by Permission" at the bottom of the first page of each music part of The Arrangement.
4. We will have The Arrangement made by a person connected with us as our employee for hire without any payment obligation on your part, and our signature below, together with yours underneath the words "'Permission Granted", shall assign to you all of our rights in The Arrangement and the copyright in The Arrangement together with the sole right of registering the copyrights as a work made for hire in your name or the named of your designee.

5. This license agreement sets forth our entire understanding and may not be modified or amended except by written agreement signed by both of us.

Very truly yours,

\_\_\_\_\_  
Name of Institution

\_\_\_\_\_  
Address

By: \_\_\_\_\_

PERMISSION GRANTED:

By: \_\_\_\_\_

Date: \_\_\_\_\_